## plication or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 09/694619 .c.E. CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN TYPE [ SMALL ENTITY OR (Column 1) (Column 2) **TOTAL CLAIMS** RATE FEE RATE FEE **BASIC FEE** 385.00 BASIC FEE 770.00 NUMBER EXTRA NUMBER FILED OR **FOR** TOTAL CHARGEABLE CLAIMS minus 🕪= X\$ 9= X\$18= OR minus 9 = INDEPENDENT CLAIMS X43 =X86= OR MULTIPLE DEPENDENT CLAIM PRESENT +140= +280= OR 1.13.05 790. OR TOTAL TOTAL OTHER THAN CLAIMS AS AMENDED - PART II SMALL ENTITY OR SMALL ENTITY (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS ADDI-ADDI-PRESENT REMAINING NUMBER TIONAL TIONAL RATE **RATE PREVIOUSLY EXTRA** AFTER AMENDMENT FEE FEE **AMENDMENT** PAID FOR X\$ X\$ = Minus Total OR Minus Independent Х Χ = OR FIRST PRESENTATION OF MULTIPLE DEFENDED IN CLAIM OR TOTAL TÖTÁL OR ADDIT, FEE ADDIT, FEE (Column 2) (Column 3) (Column 1) HIGHEST **CLAIMS** ADDI-ADDI-NUMBER PRESENT REMAINING TIONAL RATE TIONAL RATE **PREVIOUSLY EXTRA AFTER** AMENDMENT FEE FEE PAID FOR **AMENDMENT** Minus X\$ = X\$ Total OR Minus \*\*\* Independent Х = Х = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR TOTAL TOTAL OR ADDIT, FEE ADDIT, FEE (Column 3) (Column 2) (Column 1) HIGHEST ADDI-CLAIMS ADDI-**PRESENT** NUMBER REMAINING TIONAL RATE TIONAL RATE **PREVIOUSLY EXTRA** AFTER FEE ENDMEN FEE PAID FOR AMENDMENT Minus Х\$ \*\* X\$ = Total OR Minus Independent Χ Х = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

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## PATENT APPLICATION FEE DETERMINATION RECORD

09/694619

| AFTER PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  AFTER PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  (Column 1)  (Column 2)  (Column 3)  (Column 4)  (Column 4)  (Column 5)  (Column 5)  (Column 6)  (Column 7)  (Column 7)  (Column 7)  (Column 8)  (Column 1)  (Column 9)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 4)  (Column 4)  (Column 5)  (Column 6)  (Column 7)  (Column 7)  (Column 7)  (Column 8)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  (Column 1)  (Column 2)  (Column 3)  (Column 1)  (Column 3)  (Column 3)  (Column 4)  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 4)  (Column 4)  (Column 6)  (Column 7)  (Column 7)  (Column 7)  (Column 8)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  (Column 3)  (Column 4)  (Column 4)  (Column 5)  (Column 6)  (Column 6)  (Column 7)  (Column 7)  (Column 7)  (Column 8)  (Column 1)  (Column 2)  (Column 3)  (Column 1)  (Column 3)  (Column 3)  (Column 1)  (Column 1)  (Column 3)  (Column 3)  (Column 4)  (Column 4)  (Column 4)  (Column 5)  (Column 6)  (Column 6)  (Column 7)  (Column 7)  (Column 7)  (Column 8)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 3)  (Column 3)  (Column 1)  (Column 1)  (Column 3)  (Column 3)  (Column 4)  (Column 4)  (Column 5)  (Column 6)  (Column 6)  (Column 7)  (Column 7)  (Column 7)  (Column 8)  (Column 1)  (Column 8)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 3)  (Column 1)  (Column 1)  (Column 1)  (Column 3)  (Column 3)  (Column 4)  (Column 4)  (Column 4)  (Column 5)  (Column 6)  (Column 7)  (Column 6)  (Column 7)  (Column 8)  (Column 8)  (Column 8)  (Column 1)  (Column 8)  (Column 1)  (Column 8)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Column 1)  (Col        | CLAIMS AS AMENDED - PART II OTHER THAN         |             |                              |             |                                 |            |          |          |     |                    |                        |
|---|--|-------------|------------------------------|-------------|---------------------------------|------------|----------|----------|-----|--------------------|------------------------|
| REMAINING AMENDMENT PREVIOUSLY EXTRA  PRATE TIONAL FEE  Total . 5 6 Minus   | _A   | .NE         |                              |             |                                 | (Column 3) | SMAI     | L ENTITY | OR  | SMALL              | ENTITY                 |
| 1140  | (ENT   |             | REMAINING<br>AFTER           |             | ; NUMBER<br>PREVIOUSLY          |            | RATI     | TIONAL   |     | RATE               | ADDI-<br>TIONAL<br>FEE |
| 1140  | NON  |             | • 56                         |             | اما **                          | =          | X\$ 9    | = \      | OR  | X\$18=             |                        |
| Column 1)   | AME  |             |                              | <u> </u>    | 1                               |            | X43:     |          | OR  | X8 <b>6</b> =      |                        |
| Column 1)   | 9  |             | INTAMON OF MIC               | Jennee Den  | Tarra are care a                |            | +140     | =        | OR  | +280=              | -                      |
| Column 1)   |  |             |                              |             |                                 |            |          | 1 1      | OR  | TOTAL<br>ADDIT FFF |                        |
| REMAINING APTER PREVIOUSLY PAID FOR TOTAL ADDIT. FEE OR AFTER AMENDMENT PREVIOUSLY PRESENT TOTAL ADDIT. FEE OR ADDIT. FEE OR ATTOTAL ADDIT. FEE OR ADDIT. FE        |  |             |                              |             |                                 | (Column 3) |          |          |     |                    |                        |
| Column 1)   Column 2)   Column 3)   Column 3   Column 3   Column 4   Column 5   Column 5   Column 6   Column 7   Column          | ENT  |             | REMAINING<br>AFTER           |             | NUMBER<br>PREVIOUSLY            |            | RATI     | TIONAL   |     | RATE               | ADDI-<br>TIONAL<br>FEE |
| Column 1)   Column 2)   Column 3)   Column 3   Column 3   Column 3   Column 4   Column 5   Column 5   Column 6   Column 7   Column          | NON  | Total       | *                            | Minus       | **                              | =          | X\$      | =        | OR  | X\$ =              |                        |
| (Column 1) (Column 2) (Column 3)    CLAIMS   HIGHEST   NUMBER   PRESENT   PREVIOUSLY   PREJORATION OF MULTIPLE DEPENDENT CLAIM   Minus        | AME  |             | *                            | <u> </u>    |                                 | J          | X :      | =        | OR  | X =                |                        |
| (Column 1) (Column 2) (Column 3)    CLAIMS   HIGHEST   NUMBER   PRESENT   EXTRA   PREVIOUSLY   PRESENT   FEE  | FIRST FRESENTATION OF MOLTIPLE DEPENDENT CLAIM |             |                              |             |                                 |            |          | _        | OB  | + :=               |                        |
| (Column 1) (Column 2) (Column 3)  CLAIMS REMAINING AFTER PREVIOUSLY PAID FOR  Independent * Minus *** =   (Column 1) (Column 2) (Column 3)  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  (Column 1) (Column 2) (Column 3)  CLAIMS REMAINING AFTER PREVIOUSLY PRESENT APID FOR APIT TIONAL FEE  (Column 1) (Column 2) (Column 3)  CLAIMS REMAINING AFTER PREVIOUSLY PRESENT APID FOR AFTER PREVIOUSLY PRESENT ADDIT FEE  (Column 3)  RATE TION ADDIT FEE  ADDIT FEE  ADDIT FEE  X\$ = OR X =   TOTAL ADDIT FEE  ADDIT FEE  X\$ = OR X =   TOTAL FEE  ADDIT FEE  OR TOTAL ADDIT FEE  OR ADIT FEE  OR ADDIT |  |             |                              |             |                                 |            | TO       | AL       |     | TOTAL              |                        |
| CLAIMS REMAINING AFTER AMENDMENT  Total  **Minus  ****  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  **If the enitry in column 1 is less than the entry in column 2, write "0" in column 3.  **If the enitry in column 1 is less than the entry in column 2, write "0" in column 3.  **If the enitry in column 1 is less than the entry in column 2, write "0" in column 3.  **If the enitry in column 1 is less than the entry in column 2, write "0" in column 3.  **If the enitry in column 1 is less than the entry in column 2, write "0" in column 3.  **If the "Highest Number Previously Paid For" in This SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" in This SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" in This SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" in This SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" in This SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" in This SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" in This SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" in This SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" in This SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" in This SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" in This SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" in This SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" in This SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" in This SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" in This SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" in This SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" in This SPACE is        |  |             | (Column 1)                   | •           | (Column 2)                      | (Column 3) | AUUII. F | CC (     | -   | AUUII. FEE         |                        |
| Hast Presentation of Moltiple Dependent Claim   | ENT  |             | CLAIMS<br>REMAINING<br>AFTER |             | HIGHEST<br>NUMBER<br>PREVIOUSLY | PRESENT    | RATI     | TIONAL   |     | RATE               | ADDI-<br>TIONAL<br>FEE |
| Hast Presentation of Moltiple Dependent Claim   | ₩<br>Q   | Total       |                              | Minus       | ##                              | =          | X\$      | =        | OR  | X\$ =              |                        |
| Hast Presentation of Moltiple Dependent Claim   | WE   | <u> </u>    |                              | <u> </u>    | <i></i>                         | 1          | X a      | :        | 1   | X =                |                        |
| (Column 1) (Column 2) (Column 3)  CLAIMS REMAINING AFTER AMENDMENT  Total  Total  * Minus  ***  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  ** If the enitry in column 1 is less than the entry in column 2, write "0" in column 3.  ***  TOTAL ADDIT FEE  OR ADDIT FEE  OR ADDIT FEE  OR  * ADDIT FEE  OR  * ADDIT FEE  OR  * APPLIT FEE  OR  * TOTAL ADDIT FEE  OR  * ADDIT FEE  OR  * TOTAL ADDIT FEE  OR  * ADDIT FEE  * ADDIT FE        |  | FIRST PRESE | NTATION OF MU                | JLTIPLE DEP | PENDENT CLAIM                   |            |          |          | 1   |                    |                        |
| (Column 1) (Column 2) (Column 3)  CLAIMS REMAINING AFTER AFTER AMENDMENT PREVIOUSLY PAID FOR  Total  * Minus  ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEE  OH ADDIT FEE  ADDIT FEE  ADDIT FEE  ADDIT FEE  OH ADDIT FEE   |  | ٠.          |                              |             |                                 |            |          |          | ┨   |                    |                        |
| CLAIMS REMAINING AFTER AMENDMENT  Total  * Minus  ***  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **ADDI- RATE  **ADDI- RATE  TIONAL FEE   X\$ = OR  X\$ =  OR  X =  OR  TOTAL ADDIT FEE  OR  TOTAL ADDIT FEE  |  | *1.         |                              |             | •                               |            |          |          | JOH |                    |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ** ADDIT FEE  | ENT  |             | CLAIMS<br>REMAINING<br>AFTER |             | HIGHEST<br>NUMBER<br>PREVIOUSLY | PRESENT    | RATE     | TIONAL   |     | RATE               | ADDI-<br>TIONAL<br>FEE |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEE   | Š  | Total       | *                            | Minus       | ##                              | =          | X\$      |          | OB  | X\$ =              |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ** ADDIT FEE  | ME   | <u> </u>    | <u> </u>                     | l           |                                 | 1          | X :      |          | 1   | X =                | <del>-</del>           |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ** ADDIT FEE  |  | FIRST PRESE | NTATION OF MU                | JLTIPLE DEF | PENDENT CLAIM                   |            |          |          | 104 | <del></del>        |                        |
| The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.   |  |             |                              |             |                                 |            |          |          |     |                    |                        |